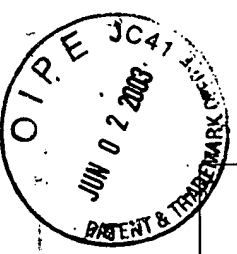


16428



PTO/SB/21 (01-03)

Approved for use through 04/03/2003. OMB 0651-0 031

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TRANSMITTAL FORM

(To be used for all correspondence after initial filing)

Application Number	09/506,079
Filing Date	February 16, 2000
First Named Inventor	Clinton
Group Art Unit	1642
Examiner Name	Anne L. Holleran
Attorney Docket No.	49321-16

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ENCLOSURES (check all that apply)

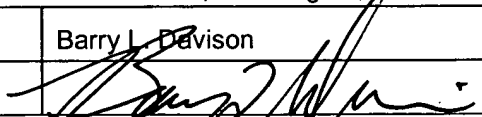
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement; Form PTO-1449 <input type="checkbox"/> Cited References <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts under 37 C.F.R. 1.52 or 1.53 <input type="checkbox"/> Response to Missing Parts/Incomplete Application	<input checked="" type="checkbox"/> Drawing(s) (8 sheets) <input type="checkbox"/> Request for Corrected Filing Receipt <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address <input type="checkbox"/> Declaration <input type="checkbox"/> Statement under 37 CFR 3.73(b) <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> Request for Refund	<input type="checkbox"/> CD(s), Number of CD(s) <input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (<i>Appeal Notice, Brief, Reply Brief</i>) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Return Receipt Postcard <input type="checkbox"/> Additional Enclosure(s) (<i>please identify below</i>): <u>Sequence Listing, Printed</u> <u>Sequence Listing, 2 copies on diskette</u> <u>Statement under 37 CFR 1.821</u>
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Remarks

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Individual Name		 22504 PATENT TRADEMARK OFFICE
Signature		
Date		

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I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, D.C. 20231 on the date specified below.		
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Signature		Date: May 30, 2003

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FEE TRANSMITTAL for FY 2003

Effective 01/01/2003. Patent fees are subject to annual revision.

<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27	Art Unit	1642
TOTAL AMOUNT OF PAYMENT (\$)	205	Attorney Docket No. 49321-16

Complete if Known

Application Number	09/506,079
Filing Date	February 16, 2000
First Named Inventor	Clinton
Examiner Name	Anne L. Holleran
Attorney Docket No.	49321-16

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METHOD OF PAYMENT (check all that apply)					FEE CALCULATION (continued)						
<input checked="" type="checkbox"/> Check	<input type="checkbox"/> Credit card	<input type="checkbox"/> Money Order	<input type="checkbox"/> None		3. ADDITIONAL FEES						
<input checked="" type="checkbox"/> Deposit Account:					Large Entity Small						
Deposit Account Number 04-0258					Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid	
Deposit Account Name Davis Wright Tremaine LLP					1051	130	2051	65	Surcharge - late filing fee or oath		
The Commissioner is authorized to: (check all that apply)					1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet.		
<input type="checkbox"/> Charge fee(s) indicated below					<input checked="" type="checkbox"/> Credit any overpayments	1053	130	1053	130	Non-English specification	
<input checked="" type="checkbox"/> Charge any additional fee(s) during the pendency of this application					1812	2,520	1812	2,520	For filing a request for ex parte reexamination		
<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee					1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action		
<input checked="" type="checkbox"/> Charge any deficiencies to the above-identified deposit account.					1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action		
FEE CALCULATION					1251	110	2251	55	Extension for reply within first month		
1. BASIC FILING FEE					1252	410	2252	205	Extension for reply within second month	205	
Large Entity Small Entity					1253	930	2253	465	Extension for reply within third month		
Fee Code	Fee(\$)	Fee Code	Fee(\$)	Fee Description	1254	1,450	2254	725	Extension for reply within fourth month		
1001	750	2001	375	Utility filing fee	1255	1,970	2255	985	Extension for reply within fifth month		
1002	330	2002	165	Design filing fee	1401	320	2401	160	Notice of Appeal		
1003	520	2003	260	Plant filing fee	1402	320	2402	160	Filing a brief in support of an appeal		
1004	750	2004	375	Reissue filing fee	1403	280	2403	140	Request for oral hearing		
1005	160	2005	80	Provisional filing fee	1451	1,510	1451	1,510	Petition to institute a public use proceeding		
SUBTOTAL (1)				(\$0)	1452	110	2452	55	Petition to revive - unavoidable		
2. EXTRA CLAIM FEES					1453	1,300	2453	650	Petition to revive - unintentional		
Total Claims		- 20** =		Extra Claims	1501	1,300	2501	650	Utility issue fee (or reissue)		
Independent Claims		- 3** =		Fee from below	1502	470	2502	235	Design issue fee		
Multiple Dependent				Fee Paid	1503	630	2503	315	Plant issue fee		
Large Entity Small Entity					1460	130	1460	130	Petitions to the Commissioner		
Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	1807	50	1807	50	Petitions related to provisional applications		
1202	18	2202	9	Claims in excess of 20	1806	180	1806	180	Submission of Information Disclosure Stmt		
1201	84	2201	42	Independent claims in excess of 3	8021	40	8021	40	Recording each patent assignment per property (times number of properties)		
1203	280	2203	140	Multiple dependent claim, if not paid	1809	750	2809	375	Filing a submission after final rejection (37 CFR § 1.129(a))		
1204	84	2204	42	** Reissue independent claims over original patent	1810	750	2810	375	For each additional invention to be examined (37 CFR § 1.129(b))		
1205	18	2205	9	** Reissue claims in excess of 20 and over original patent	1801	750	2801	375	Request for Continued Examination (RCE)		
SUBTOTAL (2)				(\$0)	1802	900	1802	900	Request for expedited examination of a design application		
**or number previously paid, if greater; For Reissues, see above					Other fee (specify) _____						
					*Reduced by Basic Filing Fee Paid						
					SUBTOTAL (3)					(\$)205	

SUBMITTED BY		Registration No. Attorney/Agent 47,309	22504 PATENT TRADEMARK OFFICE
Name (Print/Type) Barry L. Davison	Signature		

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